Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 2009

Open to Public Inspection

For the 2009 catendary year, or tax year beginning 2009, and ending Concert agreement and the Concert and Section 1 and Section	Dep Inte	artment o	of the Treasury nue Service		► The organization	may have to us	se a copy of this i	eturn to sa	tisfy state repor	ting requirer	nents	Ор	en to Publ	lic Ins	pectio
B creeks in Japancable Northern California Chapter - US 14-186523		For th	e 2009 calenda	ar year,									,		
Application pending F Name and address of pincosal office Same AS C Above Sa	В	Check if Add Nar Initi	applicable dress change me change ial return mination	Please use IRS label or print or type See specific Instruc-	C Northern Ca Green Build 130 Sutter	aliforni ding Cou St. #60	incil 00	r - US	5		14-: E Telepho 415-	1885 ine num -738	230 hber 3-5520		527
Same As C Above Tax exempt status [X] 501(c) (3) * (insert no) 4947(a)(1) or 527 Ht() Group exemption number Two * status has token structures Two * status has		\vdash	<u> </u>	F Name a	ind address of principal	officer Da	n Geiger			H(a) Is this				_	
Tax exempl status		^P				J	ocrger						-	=	H
Website: www. Usgbc-ncc.org	ī	Tax-				(insert no)	4947(a)(1) or	527	If 'No,'	attach a list	(see in	structions)		
Part Summary	J									H(c) Group	exemption nu	mber •	-		
Barrely describe the organization's mission or most significant activities	K	Form	of organization	Corpora	tion Trust	Association	Other ►] [L Year of Forma					e CA	
Organization that educates motivates provides resources, and advocates for industry transformation to build sustainable communities. 2 Check this box *	P	art I	Summar	y											
B Net unrelated business taxable income from Form 990-T, line 34 76 0 0	vernance	-	organizat industry	ion t trans	hat_educate formation_t	s, moti o build	vates, pi sustaina	ovide ble c	s resour	cesc	nd_adv 	oca:	tes fo	<u>nta</u> r	ŗΥ
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8 Contributions and grants (Part VIII, line 1h) 218,469 256,113					<i>.</i>					Р	rior Year		Curr	ent Ye	
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Sign Here Under penalties of perjury, declare that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge and belief, it is grantime of officer Preparer's signature of officer Date	Pa					<u>e 21 110111 111</u>	116 20			<u> </u>	333,00	ا، دِر		321,	750.
Paid Preparer's signature Preparer's Use Only Preparer's Use Only Preparer's Identifying number (see instructions) Preparer's Washington Firm's name (or yours if self employed). Address, and ZIP + 4. Oakland, CA 94612-2151 Date 9/1/10 Check if self employed Firm's name (or yours if self employed). 1611 Telegraph Ave Ste 318 Oakland, CA 94612-2151 Phone no (Sheck if self employed Preparer's identifying number (see instructions) Preparer's identifying number (see instructions) Preparer's identifying number (see instructions)	Sig	ın	Under penalties of true, correct, and	f perjury, I complete		mined this return (other than office	n, including accom cer) is based on al	ipanying sc I information	hedules and state n of which prepa		9.6	\neg		pelief, it	IS
Preparer's signature Crasky & Kanela 9/1/10 Semployed Firm's name (or yours if self employed). Firm's			Type or print	name and	title										
Only employed), address, and ziP + 4 Oakland, CA 94612-2151 Phone no ► (510) 835-2727	Pre	:-	signature				nela			امء ا	ſ, r	Pre (se	eparer's ident e instructions	ifying ni	ımber
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MAY THE THE SHOOTS WHO ISSUED WHIT THE PROPERTY SHOUTH CHANGE (SEE HIGHERING)	Mav	the IRS					? (see instruc	tions)			ле по	(210	X Yes	212	No

	m 990 (2009) Northern California Chapter - US	14-188523	30	Page 2
Pà	rt III Statement of Program Service Accomplishments			
1	Briefly describe the organization's mission			
	USGBC-NCC is a non-profit voluntary organization that educates, me	otivates, p	rovides	;
•	resources, and advocates for industry transformation to build sus			
	Communities			
	Communities.			
_				
2	Did the organization undertake any significant program services during the year which were not listed on	the prior	<u></u>	
	Form 990 or 990-EZ?		Yes X	No
	If 'Yes,' describe these new services on Schedule O.			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program serv	ices?	Yes X	No
	If 'Yes,' describe these changes on Schedule O		ت ۱۰۰۰	
4	,	by avances Sa	ction EO1/a	1/21
4	Describe the exempt purpose achievements for each of the organization's three largest program services and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	allocations to of	hers, the to)(3) ital
	expenses, and revenue, if any, for each program service reported		,	
4	a (Code) (Expenses \$ 423,855. including grants of \$) (F	Revenue \$	406,0) <u>22.</u>)
	Education:			
	Provided education to the building industry and general public on	green buil	ding	
	practices through 140 educational events serving 4,000+ people. The			
	public conferences or industry presentations (with attendance from			3
	each) and 37 LEED training workshops (with attendance of 1,395 per	<u>pre. /</u>		
		. .		- - -
41	b (Code (Expenses \$ 121,877. including grants of \$) (F	Revenue \$	1,7	50.)
	Advocacy:			
	USGBC-NCC's advocacy's program grew substantially in 2009 with the	hire of a	new	
	Director who mainly focuses on policy issues. Advocacy staff provi	dod inform		
	education about green building public policy issues, specifically:			
	"meet the legislator's day in Sacramento matched 50 volunteers acr			
	get acquainted with 35 legislators; significant technical and poli			
	on California's building code development involving both staff and			s <u>;</u>
	bill endorsements and letter writing campaigns for AB560, AB758, S	B279, AB33	B, SB	
	1733; and social equity efforts which included mobilizing support			
	Employer's Council.			
	Improved			
40	: (Code) (Expenses \$112, 329. including grants of \$) (R	evenue \$	235.8	75.)
	See Schedule 0			
	366 p.meam.e			
			- -	
			. _	
			· -	
				
4 d	Other program services (Describe in Schedule O) See Schedule O			
-	(Expenses \$ 77,974. including grants of \$) (Revenue \$)	
	Total program service expenses ► 736, 035.			
40	Total program service expenses P 750,000.		-	

Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4	х	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6_		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8_		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? It 'Yes,' complete Schedule D, Part V			х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
	 Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI 			
	 Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII 			,
	 Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII 			
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX Did the assessment on amount for other liabilities in Part X, line 253, If 'Yes,' complete Schedule D, Part X, line 253, If 'Yes,' complete Schedule			
	 Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 			ľ
	the organization's liability for uncertain tax positions under FIN 48? If Yes, complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	Х	
12	A Was the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A X			
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		X
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		X
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17		<u>x</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	х	
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20	1	<u>X</u>

Form 990 (2009) Northern California Chapter - US

Part IV (Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1° If 'Yes,' complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2 ⁷ If 'Yes,' complete Schedule I, Parts I and III	22_		x
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		x
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I</i>	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		x
28	instructions for applicable filing thresholds, conditions, and exceptions)			32 E2
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	Х	
	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		x
	c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	
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Form **990** (2009)

Part Y Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns Enter -0- if not applicable 1 a b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0 1 b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming $\overline{\mathbf{x}}$ (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 9 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? X b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account) 4a Х **b** If 'Yes.' enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X 5 b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5с 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? X 7 a b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7 e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 71 g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h X Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 92 b Did the organization make any distribution to a donor, donor advisor, or related person? 9 b 10 Section 501(c)(7) organizations. Entera Initiation fees and capital contributions included on Part VIII, line 12 10 a b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from other members or shareholders 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against

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amounts due or received from them)

Form **990** (2009)

12a

12b

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	ction A.	Governing	Body and N	lanagemei	nt								
												Yes	s No
1	a Enter the	number of voti	ng members o	of the governi	ng body	<i>'</i>			1 a		9	1	
	b Enter the	number of voti	ng members t	hat are indep	endent				1Ь		9	1	
2	Did any o officer, d	officer, director, irector, trustee	trustee, or ke or key employ	y employee h ee?	ave a fa	amily relat	lionship or a b	ousiness re	elationship	with any othe	er 2	1	X
3	Did the o	rganization dele s, directors or ti	egate control o	ver managen v employees t	nent dut to a mar	ties custoi nagement	marily perform company or o	ned by or other pers	under the c	irect supervi	sion 3	1	х
4	Did the o	rganization mal	ce any signific	ant changes t	to its org	ganization	al documents	·			4	1	X
		prior Form 990											
5	Did the o	rganization bec	ome aware du	ring the year	of a ma	aterial dive	ersion of the o	rganizatio	n's assets	See Sch	0 5	X	
6	Does the	organization ha	ive members	or stockholde	rs?						6	↓	X
7:	a Does the governing	organization ha g body?	ive members,	stockholders,	, or othe	er persons	who may elec	ct one or	more mem	bers of the		a X	
1	b Are any o	decisions of the	governing boo	dy subject to	approva	l by mem	bers, stockhol	ders, or o	ther persor	ıs [?]	7	b	Х
8	Did the o	rganization con ving	temporaneous	ly document	the mee	etings held	d or written ac	tions unde	ertaken dur	ing the year	by		
i	a The gove	rning body?									8	a X	
1	b Each con	nmittee with aut	hority to act o	n behalf of th	ne gover	ning body	,7				8	ь Х	
9	Is there a organizat	any officer, direction's mailing ac	dress? If 'Yes	,' provide the	names	and addr	esses in Sche	dule O			9		X
Sec	tion B.	Policies (This Section	n B reques	ts ınfoi	rmatıon	about polic	ies not	required	by the Inte	rnal		
Reve	enue Code)											
	6 # .		1									Yes	
		organization ha	•	•	•						10	a	X
	and brane	loes the organiz ches to ensure t	heir operation	s are consist	ent with	those of	the organization	on?			10		_
		organization pro					•				11	X	Щ.
		in Schedule O to organization ha	•		-				See :	Schedule		TV	
		ers, directors or			•	-	•		that aculd	an 10 1100	12	a X	+-
	to conflict	ts?					_			-	12	<u> Х</u>	
		organization reg O how this is d				d entorce	compliance w	ith the po	olicy? If 'Ye	s,' describe i	n 12	X	<u> </u>
		organization ha									13	—	X
		organization ha									14	 	X
		rocess for deter comparability da								, independer	ıt	<u>.</u>	
		nization's CEO,						hedule	: Q		15:	1	↓
t		cers of key emp	-	~							151	X	↓
		line 15a or 15b				- (,				1	1	ĺ
	entity duri	ganization inve ing the year?							_		168	ļ ·	X
Ь	in joint ve	as the organizati inture arrangem h respect to suc	ents under ap	plicable feder	y or proc ral tax la	cedure re aw, and ta	quiring the org iken steps to s	ganization safeguard	to evaluate the organi	e its participa zation's exem	ation npt 16t	ļ	
Sec		Disclosures			•							ــــــــــــــــــــــــــــــــــــــ	—
17	List the st	ates with which	a copy of this	Form 990 is	required	d to be file	ed ► CA			<u> </u>			
18	inspection	104 requires an Indicate how y	organization t	o make its Fo e available (orms 102 Check al	23 (or 102 II that app	24 if applicable ly.	e), 990, ar	nd 990-T (5	01(c)(3)s onl	y) avaılat	le for	public
	☐ Own v	vebsite		s website		X Upon	request						
	statement	n Schedule O w s available to th	e public S	See Sched	iule ()	_	_			, ,		ancial
		name, physical									organiza	lion	
•	Paul B	uckman 130	Sutter !	St#600	Sar	n Franc	cisco <u>CA</u>	94104	415-738	-5520			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of 'key employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers; key employees, highest compensated employees, and former such persons

Check this box if the organization did no	T .	sate a	any		_	officer	, dır			
(A)	(B)	١_	_	•	c)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	institutional trustee	Officer	a Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099 MISC)	Reportable compensation from related organizations (W-2/1099 MISC)	Estimated amount of other compensation from the organization and related organizations
Andrea Traber President	3	х		х				0.	0.	0.
Pauline Souza Director	2	х						0.	0.	0.
Larry Strain Director	2	Х						0.	0.	0.
Lisa Galley Treasurer	3	х		х				0.	0.	0.
Laura Billings Director	2	х						0.	0.	0.
Grant French Director	2	Х						0.	0.	0.
Barry Giles Director	2	Х						0.	0.	0.
Panama Bartholomy Vice President	3	Х		Х				0.	0.	0.
Jim Coyle Secretary	3	X		х				0.	0.	0.
Dan Geiger Executive Dir.	55			х				125,833.	0.	7,905.

Part VII Section A. Officers, Directors, Trus	tees, k	\ ey	En	ıple	oye	es,	an	d Highest Cor	npensated Emp	oloyees (cont.)
. (A)	(B)			-	c)			(D)	(E)	(F)
Name and Title	Average hours			,	_	_	_	Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	or de	Insti	Officer	Key employee	employee	Former	the organization (W-2/1099 MISC)	related organizations (W-2/1099-MISC)	compensation from the
		reck	i i	ğ	E S	est c	₫	(11-2-1035 111100)	(11-2-1055-111100)	organization and related
]	, E	101		loye	ğ				organizations
) stee	nstitutional trustee		"	ens:				
			*			ed				
		H	_	⊢	⊢	├	├	-		
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				l						
1 b Total							•	125,833.	0.	7,905.
2 Total number of individuals (including but not limited	to thos	se lis	sted	abo	ve)	who	o re		\$100,000 in reporta	
from the organization 1										<u> </u>
										Yes No
3 Did the organization list any former officer, director	or truste	ee, k	ey e	emp	loye	e, c	or hi	ghest compensate	ed employee	
on line 1a ³ If 'Yes,' complete Schedule J for such in										3 X
4 For any individual listed on line 1a, is the sum of repetition the organization and related organizations greater the	oortable nan \$150	con 0.00	าper 0? <i>I</i>	nsati f 'Ye	ion . es' d	and com	oth olete	er compensation f e <i>Schedule J for</i> s	rom uch	
individual										4 X
5 Did any person listed on line 1a receive or accrue co	mpensa	atıor	fro	m a	ny ι	ınre	late	d organization for	services	
rendered to the organization? If 'Yes,' complete Sch	edule J	for :	such	ı pe	rsor	7				5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensate	ed inder	end	ent	con	rac	tors	that	t received more th	an \$100 000 of	.
compensation from the organization										
(A)							ı	(B)		(C)
Name and business address	<u> </u>						_	Description of	Services	Compensation
							\dashv	<u> </u>		
							\dashv			
								 		
							\dashv			
							\dashv			
2 Total number of independent contractors (including t	out not I	ımıta	ed to	o the)SP	liste	اد او	hove) who receive	d more than	
\$100,000 in compensation from the organization			۱۱ م	- 410					a more than	

Pa	rt VIII Statement of Revenue		· · · · · · · · · · · · · · · · · · ·	-	,
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
S S	1a Federated campaigns 1a				
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	b Membership dues 1b				
\$ S	c Fundraising events. 1c		}		
FIN	d Related organizations 1d				
S.G	e Government grants (contributions) 1 e				
	f All other contributions gifts grants and				
	f All other contributions, gifts, grants, and similar amounts not included above 1f 256, 113.				
ž Š	g Noncash contribns included in Ins 1a-1f. \$				
용론	h Total. Add lines 1a-1f	256,113.		<u> </u>	
Ĵ	Business Code				
Ę	2a Program fees	426,027.	426,027.		
E 25	b Membership Dues & Assessments	217,620.	217,620.		
Ž	C				
SEI	d				
Z A	e	<u>-</u>			ļ
PROGRAM SERVICE REVENUE	f All other program service revenue	C42 C47			
	y rotal. Add lines 2a-2i	643,647.			
	3 Investment income (including dividends, interest and other similar amounts)	2,349.			2,349.
	4 Income from investment of tax-exempt bond proceeds	2,015.			2,313.
	5 Royalties				
	(i) Real (ii) Personal				
	6a Gross Rents				
	b Less rental expenses		į		,
	c Rental income or (loss)				
	d Net rental income or (loss)			·-···	
	7a Gross amount from sales of (i) Securities (ii) Other				
	assets other than inventory				
	b Less. cost or other basis and sales expenses	·			
	c Gain or (loss)				
	d Net gain or (loss)		~ ~ ~ .	-	• ′
₩.	8a Gross income from fundraising events (not including \$				
OTHER REVENU	of contributions reported on line 1c)				
RRE	See Part IV, line 18 a 51,418.				
HE.	b Less direct expenses b 65,582.				
٥	c Net income or (loss) from fundraising events	-14,164.	-14,164.		
	9a Gross income from gaming activities See Part IV, line 19				
	b Less direct expenses b				
	c Net income or (loss) from gaming activities				
	10 a Gross sales of inventory, less returns and allowances				
	b Less cost of goods sold b		÷ .		
	c Net income or (loss) from sales of inventory		<u> </u>		-
	Miscellaneous Revenue Business Code		_		_
- [11a Miscellaneous				
	b				
	с				
I	d All other revenue				
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions	887,945.	629,483.	0	2,349.

Part IX | Statement of Functional Expenses

Form 990 (2009)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	i	- 1	e not required to comple (B)	(C)	(D)
Do 1 6b, .	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	133,738.	97,774.	12,351.	23,613
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.]	0.	0
7	Other salaries and wages.	290,123.	247,827.	19,610.	22,686
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits.	22,362.	18,324.	1,633.	2,405
10	Payroll taxes	35,224.	28,986.	2,628.	3,610
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	: Accounting	22,280.		22,280.	
d	Lobbying				
е	Prof fundraising svcs. See Part IV, In 17				
	Investment management fees				
g	Other	174,428.	171,766.	1,162.	1,500
12	Advertising and promotion	1,927.	1,927.		
13	Office expenses	14,619.	11,294.	1,184.	2,141
14	Information technology	22,406.	19,381.	1,962.	1,063
	Royalties	12 020	11 406	1 074	1 450
16	Occupancy	13,930.	11,406.	1,074.	1,450
17 18	Travel Payments of travel or entertainment expenses for any federal, state, or local public officials	21,506.	18,699.	785.	2,022
19	Conferences, conventions, and meetings	86,374.	86,374.		<u> </u>
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,709.	4,675.	440.	594
	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25	4,589.	3,758.	354.	477
-	Bank, payroll, merchant fees	28,833.		25,660.	3,173
	Printing and Publications	8,757.	1,848.	23,000.	6,909
	Scholarships and contests	7,777.	7,777.		
	Miscellaneous	3,671.	2,954.	717.	
	Dues, licenses, service fees	1,545.	1,265.	119.	161
	All other expenses				
	Total functional expenses Add lines 1 through 24f	899,798.	736,035.	91,959.	71,804
26	Joint costs. Check here ► X if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation			,	

			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing.	18,590.	1	14,42
	2	Savings and temporary cash investments	253,200.	2	277,01
	3	Pledges and grants receivable, net	<u> </u>	3	
	4	Accounts receivable, net	72,559.	4	76,55
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1))			
A		and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
ASSETS	7	Notes and loans receivable, net		7	
Ē	8	Inventories for sale or use		8	
Š	9	Prepaid expenses and deferred charges	3,723.	9	4,09
	10 a	Land, buildings, and equipment cost or other basis 10a 19,125. Complete Part VI of Schedule D			
	l t	Less accumulated depreciation 10b 12,691.	8,494.	10 c	6,43
	11	Investments – publicly-traded securities		11	<u> </u>
	12	Investments – other securities See Part IV, line 11		12	
	13	Investments – program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	10,000.	15	49
ı	16	Total assets Add lines 1 through 15 (must equal line 34)	366,566.	16	379,01
7	17	Accounts payable and accrued expenses	32,963.	17	57,26
-	18	Grants payable	<u> </u>	18	
	19	Deferred revenue		19	
<u> </u>	20	Tax-exempt bond liabilities		20	
3	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II		7	
		of Schedule L		22	
5	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
ı	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25.	32,963.	26	57,26
!		Organizations that follow SFAS 117, check here X and complete lines			
		27 through 29 and lines 33 and 34.		سقط	· · · · · · · · · · · · · · · · · · ·
		Unrestricted net assets	333,603.	27	321,750
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
!		Organizations that do not follow SFAS 117, check here ▶			
		lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		· 30	
	31	Paid-in or capital surplus, or land, building, and equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	333,603.	33	321,750
1	34	Total liabilities and net assets/fund balances.	366,566.	34	379,014

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Form 990 (2009)	Northern	California	Chapter	-	US

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Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990 \square Cash \square Accrual \square Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2 a		X
b Were the organization's financial statements audited by an independent accountant?	2 b	X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	e audit,	x	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue consolidated basis, separate basis, or both	d on a		
X Separate basis Consolidated basis Both consolidated and separate basis			. .
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S Audit Act and OMB Circular A-133?	ingle 3a		х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits.	red audit		

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Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

tatus and Public Support 2009
tion 501(c)(3) organization or a section 4947(a)(1)

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

/ii>

Total

Attach to Form 990 or Form 990-EZ. See separate instructions.

Employer identification number Name of the organization Northern California Chapter - US Green Building Council 14-1885230 **Part I Reason for Public Charity Status** (All organizations must complete this part. See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 7 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 9 June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that 11 describes the type of supporting organization and complete lines 11e through 11h Type II Type III — Functionally integrated Type III— Other Type I c | By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11 g (ï)

	(11) w (w)	p	(,,								
	(iii) a 35% contro	lled entity of a persor	n described in (i) or (ii) a	above?						11g (iii)	
h	Provide the following	ng information about	the supported organizati	ons							
	(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiza (i) liste	Is the tion in col d in your erning ment?	the organ	Did you notify organization in col (i) of our support? (vi) Is the organization in (i) organized in U S ?		tion in col 🌡	(vii) Amount of Support	
				Yes	No	Yes	No	Yes	No		
	<u></u>										_
					į						
				-							
										-	
							<u> </u>				
-	-		, , ,	1					1		

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a family member of a nerson described in (i) above?

Schedule A (Form 990 or 990-EZ) 2009

11 a (ii)

Schedule A (Form 990 or 990-EZ) 2009 Northern California Chapter - US 14-1885230

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(ii) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I)

` 	(Complete only if you check	ed the box on line	5, 7, 01 8 01 Pari	(1)				
	tion A. Public Support	1	· · · · · · · · · · · · · · · · · · ·					
beg	ndar year (or fiscal year inning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')	101,980.	78,747.	232,225.	419,182.	473,733.	1,305,867.	
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	:		•			0.	
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						0.	
4	Total. Add lines 1-through 3	101,980.	78,747.	232,225.	419,182.	473,733.	1,305,867.	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)					-	32,658.	
6	Public support. Subtract line 5 from line 4						1,273,209.	
Sec	tion B. Total Support						· · · · · · · · · · · · · · · · · · ·	
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
7	Amounts from line 4	101,980.	78,747.	232,225.	419,182.	473,733.	1,305,867.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	1,250.	1,904.	2,741.	4,300.	2,349.	12,544.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on					·	0.	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) See Part IV				2,651.		2,651.	
11	Total support. Add lines 7 through 10						1,321,062.	
12	Gross receipts from related activ	ities, etc (see ins	tructions)			12	971,748.	
13	First five years. If the Form 990 organization, check this box.and		ition's first, secon	d, third, fourth, o	r fifth tax year as	a section 501(c))(3) ► □	
	tion C. Computation of Put							
	Public support percentage for 20	•	•	e 11, column (f)		14	96.4%	
15	Public support percentage from 2	2008 Schedule A,	Part II, line 14			15	95.7%	
16 a	33-1/3 support test $-$ 2009. If the and stop here. The organization	e organization did qualifies as a pub	not check the box licly supported or	on line 13, and ganization	the line 14 is 33-	1/3 % or more, o	heck this box	
,p	33-1/3 support test — 2008. If the and stop here. The organization	e organization did qualifies as a publ	not check a box o licly supported org	on line 13, or 16a, ganization	and line 15 is 33	3-1/3% or more, o	check this box	
17a	7a 10%-facts-and-circumstances test — 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.							
	b 10%-facts-and-circumstances test — 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.							
18 BAA	Private foundation. If the organiz	zation did not ched	ck a box on line, 1	13, 16a, 16b, 17a <u>,</u>			90 or 990-EZ) 2009	

Part !!! Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you chec	ked the box on I	ine 9 of Part 1)				
	tion A. Public Support		1—	ı			
	ndar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')						
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose					·	
3	Gross receipts from activities that are not an unrelated trade or business under section 513	-					
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
7 a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line						
	7c from line 6)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal yr beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
_	Add lines 10a and 10b					<u>.</u>	
11	Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
	Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 is organization, check this box and	s for the organiza	ation's first, secon	d, third, fourth,	or fifth tax year as	a section 501(c)(3	" ▶□
	ion C. Computation of Pub						
	Public support percentage for 200			e 13, column (f))		15	%
	Public support percentage from 2		•			16	%
	ion D. Computation of Inve						
	Investment income percentage for			_	mn (f))	17	%
	Investment income percentage fro				(//	18	%
19a	33-1/3 support tests – 2009. If the or more than 33-1/3%, check this bo	ganization did not	check the box on li	ne 14, and line 15	s more than 33-1/39 blicly supported o	%, and line 17 is not	▶ □
b	33-1/3 support tests – 2008. If the is not more than 33-1/3%, check t	e organization did	d not check a box	on line 14 or 19a	a, and line 16 is m	ore than 33-1/3%,	and line 18
20	Private foundation. If the organization	ation did not che	ck a box on line 1	4, 19a, or 19b, cl	neck this box and	see instructions	►∏

Schedule	A (For	m 990 oı	990-E	Z) 2009	No	rther	n Cal	lifo	rnia	Chap	ter	- US		14-18	85230	Page 4
Part IV	Sup	pleme	ntal Ir	or 17h	tion.	Compl	ete th	IS p	art to	provide	e the	explan	ations	required by formation.	Part II,	line 10;
				01 170	, ariu	T GIT II	1, 11116	12.	1100	iue arry	Oute	auun	ionai ii	iomation.	See ilist	ructions.
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Schedule A, Part IV - Supplemental Information						
Client USGBCNCA		Northern (Greer	California Char n Building Cou	oter - US ncil		14-1885230
8/31/10	· #-					04 04PN
Part II, Line 10 - O	ther Income					
Nature and Sou	rce	2009	2008	2007	2006	2005
Miscellaneous	Total §	c	2,651. 2,651.			
	10ta1 <u>\$</u>	0. \$	2,031.	0.	\$ 0. \$	0.
	•					
•						

SCHEDULE C (Fòrm, 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2009

Open to Public Inspection

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

• Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C.

• Section 501(c) (other than section 501(c)(3)) organizations, complete Parts I-A and C below. Do not complete Part I-B

Section 527 organizations complete Part 1-A only

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

	•	s, to Form 990, Part IV, line 5 (Proxy Tax),	then					
		organizations Complete Part III						
	of organization			Employer identific				
	rthern California C		F01(-)	14-188523				
		rganization is exempt under secti			zation.			
1	•	organization's direct and indirect political	campaign activities in					
2	Political expenditures			▶\$				
	Volunteer hours							
Pa		rganization is exempt under secti						
1	•	cise tax incurred by the organization under		► \$				
		cise tax incurred by organization managers		▶ \$				
	_	a section 4955 tax, did it file Form 4720 for	this year?		Yes No			
	a Was a correction made?				∐Yes ∐No			
	of If 'Yes,' describe in Part IV							
Pai	rt I-C Complete if the o	rganization is exempt under secti	on 501(c) , excep	t section 501(c)(3).				
1	Enter the amount directly ex	pended by the filing organization for section	on 527 exempt function	on activities > \$				
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities							
3	Total of exempt function exp	penditures Add lines 1 and 2 Enter here a	ind on Form 1120-PC	^L , ▶\$				
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No			
5	made For each organization	and employer identification number (EIN) I listed, enter the amount paid from the filivere promptly and directly delivered to a se the (PAC). If additional space is needed, pr	na organization's fun	ds. Also enter the amou	int of political			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0			

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Schedule C (Form 990 or 990-EZ) 2009

b Lobbying ceiling amount (150% of line 395,853. 2a, column (e)) c Total lobbying 2,349 710 3,059. expenditures d Grassroots nontaxable 25,983 39,993 65,976. amount e Grassroots ceiling amount (150% of line 2d, column (e)) 98,964. f Grassroots lobbying expenditures 2,349 710 3,059.

BAA

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 Northern California Chapter - US Part.II-B Complete if the organization is exempt under section 501(c)(3) and has NC			5230 n 5768		Page
(election under section 501(h)).	(i	a)		(b)	
	Yes	No	Ar	nount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements?					
d Mailings to members, legislators, or the public?					-
e Publications, or published or broadcast statements?		$\neg \dashv$			
f Grants to other organizations for lobbying purposes?	-	-			
g Direct contact with legislators, their staffs, government officials, or a legislative body?		-			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	+				
i Other activities? If 'Yes.' describe in Part IV	\vdash				_
·	-				
j Total Add lines 1c through 1:	1 4	-			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	1				-
b If 'Yes,' enter the amount of any tax incurred under section 4912	· ·	ļ.			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		-			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 50	l(c)(5),	or s	ection 5	01(c)(6) .
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	_		3		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line	(c)(5), 3 is ar	or se	ection 5 red 'Yes	01(c)(6)
1 Dues, assessments and similar amounts from members.		1	_		
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a Current year		2a			
b Carryover from last year	Γ	2b			
c Total	1	2c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	ŀ	3			
					-

a Current year	Za		
b Carryover from last year	2b		
c Total	2 c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4		
5 Taxable amount of lobbying and political expenditures (see instructions)	5		
Part IV Supplemental Information		_	
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, and Part Also, complete this part for any additional information	-	line 1:	. – -
	- - -		
	- - -		
	- ·		

Schedule C (Form 990 or 990-EZ) 2009 Northern California Chapter - US Supplemental Information (continued)	14-1885230	Page 4
Part-IV	Supplemental Information (continued)		
	~		
			-
		-	
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			.

SCHÈDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
 ► Attach to Form 990.
 ► See separate instructions

OMB No 1545 0047 Open to Public

Name of the organization		Employer Identification number
Northern California Chapter - US Green Building Council		14-1885230
Part 1 Organizations Maintaining Dono the organization answered 'Yes' t	r Advised Funds or Other Similar Fur o Form 990, Part IV, line 6.	nds or Accounts Complete If
	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and do funds are the organization's property, subject	nor advisors in writing that the assets held in d to the organization's exclusive legal control?	onor advised Yes No
6 Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private bene	rs, and donor advisors in writing that grant fun the benefit of the donor or donor advisor or for efit??	ds may be any other Yes No
Part II Conservation Easements Comple	ete if the organization answered 'Yes'	to Form 990, Part IV, line 7.
1 Purpose(s) of conservation easements held by	y the organization (check all that apply)	
Preservation of land for public use (e.g., r	ecreation or pleasure) Preservation	of an historically important land area
Protection of natural habitat	Preservation	of certified historic structure
Preservation of open space	_	
Complete lines 2a through 2d if the organizati last day of the tax year	on held a qualified conservation contribution in	the form of a conservation easement on the
		Held at the End of the Year
a Total number of conservation easements		2a
b Total acreage restricted by conservation ease	ments	2b
c Number of conservation easements on a certification		2c
d Number of conservation easements included i	n (c) acquired after 8/17/06	2d
3 Number of conservation easements modified,	transferred, released, extinguished, or termina	ted by the organization during the tax
year ▶		
4 Number of states where property subject to co	nservation easement is located >	_
5 Does the organization have a written policy re and enforcement of the conservation easemer	garding the periodic monitoring, inspection, haint it holds?	ndling of violations, Yes No
6 Staff and volunteer hours devoted to monitoring the year ►	•	
7 Amount of expenses incurred in monitoring, in during the year	specting, and enforcing conservation easemen	\$
8 Does each conservation easement reported or 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of se	ction Yes No
9 In Part XIV, describe how the organization reports include, if applicable, the text of the footnote to conservation easements	conservation easements in its revenue and expend o the organization's financial statements that o	ise statement, and balance sheet, and lescribes the organization's accounting for
Part III Organizations Maintaining Colle Complete if the organization answ	ctions of Art, Historical Treasures, or wered 'Yes' to Form 990, Part IV, line	Other Similar Assets 8.
1a If the organization elected, as permitted under treasures, or other similar assets held for publ the text of the footnote to its financial stateme	ic exhibition, education, or research in furthera	ent and balance sheet works of art, historical nce of public service, provide, in Part XIV,
b If the organization elected, as permitted under treasures, or other similar assets held for publ amounts relating to these items	SFAS 116, to report in its revenue statement a ic exhibition, education, or research in furthera	and balance sheet works of art, historical nce of public service, provide the following
(i) Revenues included in Form 990, Part VIII,	line 1	> \$
(ii) Assets included in Form 990, Part X		*\$ *\$
2 If the organization received or held works of a amounts required to be reported under SFAS	t, historical treasures, or other similar assets for the first treasures of the second streams.	or financial gain, provide the following
a Revenues included in Form 990, Part VIII, line	-	► \$
b Assets included in Form 990, Part X		▶ \$
		·

Schedule D (Form 990) 2009 Nort					85230	Page 2
Part III Organizations Mainta	ining Collection	ons of Art, Hist	orical Treasures,	or Other Similar As	sets (cont	ınued)
3 Using the organization's acquisitiems (check all that apply).	lion accession and	other records, che	eck any of the following	g that are a significant (use of its colle	ection
a Public exhibition		d Loan	or exchange program	s		
b Scholarly research		e 💹 Othe	·			
c Preservation for future gene						
4 Provide a description of the organization Part XIV					ose in	
5 During the year, did the organiza assets to be sold to raise funds					Yes	No
Part IV Escrow and Custodia 9, or reported an amount	Il Arrangement ount on Form 9	ts Complete if 6 90, Part X, line	organization answ 21.	ered 'Yes' to Form	990, Part I\	V, line
1a Is the organization an agent, tru included on Form 990, Part X?				other assets not	Yes	No
b If 'Yes,' explain the arrangemen	t in Part XIV and c	omplete the follow	ring table			
_					Amount	
c Beginning balance				1c		
d Additions during the year				_1d		
e Distributions during the year				1 e		
f Ending balance				1f		
2a Did the organization include an a		90, Part X, line 21	7		Yes	No
b If 'Yes,' explain the arrangement			107 11 5	200 5 1 11 1 1 1 1 1 1		
Part V Endowment Funds Co			··			
	(a) Current year	(b) Prior yea	r (c) Two years b	ack (d) Three years back	(e) Four y	ears back
1 a Beginning of year balance			 			
b Contributions						
c Net Investment earnings, gains, and losses						
d Grants or scholarships						· · · · · · · · · · · · · · · · · · ·
 Other expenditures for facilities and programs 						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentage	e of the year end t	palance held as				
a Board designated or quasi-endov	vment •	*				
b Permanent endowment ▶	 &					
c Term endowment ►	8					
3a Are there endowment funds not a organization by	n the possession o	of the organization	that are held and adr	ninistered for the	Yes	s No
(i) unrelated organizations					3a(i)	- 100
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(II), are the related of	organizations listed	l as required on So	chedule R?		3b	
4 Describe in Part XIV the intended	•	•				
Part VI Investments—Land, B				(, line 10.		
Description of investment	(a) C	ost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book	Value
1a Land						
b Buildings						
c Leasehold improvements						
d Equipment			3,475.	2,306.		1,169.
e Other			15,650.	10,385.		5,265.
otal. Add lines 1a through 1e (Columi	n (d) must equal F	orm 990. Part X. c				6,434.
BAA			3=77 10(0)		dule D (Form 9	
					= v o	

Schedule D (Form 990) 2009 Northern Californ	ia Chapter - US	14-188	5230 Page 3
Part VII Investments—Other Securities See Fo			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	iion ket value
Financial derivatives		,	
Closely-held equity interests			
Other			
		· · · · · · · · · · · · · · · · · · ·	
	<u> </u>		
Total. (Column (b) must equal Form 990 Part X, col. (B) line 12)		,	
Part VIII Investments—Program Related (See F			
(a) Description of investment type	(b) Book value	(c) Method of valuat Cost or end-of-year mark	ion (et value
		Cost of end-of-year mark	et value
			
12.2.00			
Total. (Column (b) must equal Form 990, Part X, Col (B) line 13.)			
Part IX Other Assets (See Form 990, Part X, I			
(a) Des	scription		(b) Book value
			
			
	.		
			
			
			<u></u> .
			
Total. (Column (b) must equal Form 990, Part X, col (B), lir	ne 15)	•	
Part X Other Liabilities (See Form 990, Part)			
(a) Description of Liability	(b) Amount		
Federal Income Taxes	(b) / timount	-	
Coords moone rando		- 	
	-		
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			•
otal. (Column (b) must equal Form 990, Part X, col (B) line 25)	- 		
P. FIN 48 Footnote In Part XIV. provide the text of the footnote	ote to the organization	s financial statements that reports the c	rganization's liability

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Schedule D (Form 990) 2009 Northern California Chapte	er - US 14-1885	230 Page
Part XI Reconciliation of Change in Net Assets from Fo	orm 990 to Financial Statements	
1 Total revenue (Form 990, Part VIII, column (A), line 12)		887,945.
2 Total expenses (Form 990, Part IX, column (A), line 25)		899,798.
3 Excess or (deficit) for the year Subtract line 2 from line 1		-11,853.
4 Net unrealized gains (losses) on investments		
5 Donated services and use of facilities	Γ	
6 Investment expenses	Γ	
7 Prior period adjustments	F	
8 Other (Describe in Part XIV)	<u> </u>	
9 Total adjustments (net) Add lines 4 through 8		
10 Excess or (deficit) for the year per audited financial statements. Co	ombine lines 3 and 9	-11,853.
Part XII Reconciliation of Revenue per Audited Financia		
1 Total revenue, gains, and other support per audited financial states		887,945.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments	2a	
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIV)	2d	
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	887,945.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	, , <u>}</u>	001,340.
a Investments expenses not included on Form 990, Part VIII, line 7b	1 1 1 1 1	
b Other (Describe in Part XIV)	4b	
c Add lines 4a and 4b	4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Pa		887,945.
Part XIII Reconciliation of Expenses per Audited Financi		
Total expenses and losses per audited financial statements	1	899,798.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		033, 130.
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIV)	2d	
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	899,798.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	 - -	033, 130.
a Investments expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIV)	4b	
c Add lines 4a and 4b	4c	
5 Total expenses Add lines 3 and 4c (This must equal Form 990, Pa		899,798.
Part XIV Supplemental Information	arti, inte 10)	655, 130.
Complete this part to provide the descriptions required for Part II, lines 3 line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part 3 information	3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b XIII, lines 2d and 4b Also complete this part to pro	and 2b, Part V, wide any additional
DAA TEEA22041	020000	D (Form 990) 2000

Schedule D (Form 990) 2009 Northern California Chapter - US 14-1885230 Part XIV: Supplemental Information (continued)	
	- -
·	

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

2009

2009

Department of the Treasury Internal Revenue Service Complete if the organization answered'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form990 or Form 990-EZ. ► See separate instructions.

Northern Cali	lfornia Ch	napter	- US			Employer Identific	
Green Buildir	ng Council	<u>'</u>			<u> </u>	14-188523	0
Part Form 990EZ filers are not req	lete if the orga	nization a ete this na	nswered '\ art	Yes' to Form 990, Part I	IV, line 1	7	
1 Indicate whether the organization							
Mail solicitations				Solicitation of non-	•	•	
Internet and email solicitations	5			Solicitation of gove		grants	
Phone solicitations				Special fundraising	g events		
In-person solicitations							
2a Did the organization have written of employees listed in Form 990, Par	or oral agreement t VII) or entity	ent with ar in connec	ny individu tion with p	ial (including officers, d irofessional fundraising	rectors, services	trustees or key	Yes X No
b If 'Yes,' list the ten highest paid in compensated at least \$5,000 by the	dividuals or en le organization	tities (fund	draisers) p	ursuant to agreements	under w	hich the fundra	iser is to be
(i) Name of individual or entity (fundraiser)	(ii) Activity	have custo	fundraiser dy or control ributions?	(iv) Gross receipts from activity	(or r	nount paid to etained by) aiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
						i	
	- - -						
		-					
		1	-				
							- · · · · · · · · · · · · · · · · · · ·
Total 3 List all states in which the organiza		ad as lines	▶		- 1.6 - 1		0.
or licensing	ition is register	ed of licer	1260 10 201	neit funds of has been f	notinea i	t is exempt from	m registration
					·		
						. – – – – – .	
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						. 	
							
						. .	

•	
Schedule G (Form 990 or 990-EZ) 2009 Nort	nern California Chapter - US

14-1885230

Page 2

		reported more than \$15,000 on F	orm 990-EZ, line 6	5a. List events with	gross receipts gre	ater than \$5,000.
			(a) Event #1 Fundraiser	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
E			(event type)	(event type)	(total number)	
REVENUE	1	Gross receipts	51,418.			51,418.
-	2	Less Charitable contributions				
	3	Gross income (line 1 minus line 2)	51,418.			51,418.
	4	Cash prizes				
D	5	Noncash prizes				
D I R E C T	6	Rent/facility costs				
	7	Food and beverages				
X P E	8	Entertainment				
EXPENSES	9	Other direct expenses	65,582.			65,582.
S	10	Direct expense summary Add lines 4- tl	hrough 9 in column (d)		•	65,582.
	11				<u> </u>	-14,164.
Pai	T III	Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a	ation answered 'Ye	es' to Form 990, Pa	rt IV, line 19, or re	ported more than
			(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming
REVENUE			(a) Singo	bingo/progressive bingo	(c) Other gaining	(Add col (a) through col (c))
E N	İ		·	birigo		cor (c))
Ĕ	1	Gross revenue				
_ E	2	Cash prizes				
DIRECT S	3	Non-cash prizes				
T E S	4	Rent/facility costs				
	5	Other direct expenses				
			Yes%	Yes %	Yes %	
	6	Volunteer labor	No	No	No	
	7	Direct expense summary Add lines 2 three	ough 5 in column (d)		•	
	8	Net gaming income summary Combine li	nes 1, column (d) and	line 7	•	
•	C-4-	s the state(s) in which the eveningtion on	arataa aanuna aatuutaa			YES NO
		er the state(s) in which the organization op e organization licensed to operate gaming				— _{9a}
		o,' explain				
10 a		e any of the organization's gaming licenses		or terminated during the	tax vear?	\ 10a
		es,' explain	,,,,,		tax your.	
				-		
11	Does	s the organization operate gaming activitie	s with nonmembers?			11
12	Is the	e organization a grantor, beneficiary or tru inister charitable gaming?	stee of a trust or a mer	mber of a partnership o	r other entity formed to	12
RΔΔ	Julill		TEF 437021 02			m 990 or 990 E7) 2009

Schedule G (Form 990 or 990-E2) 2009 Northern California Chapter - US 14-18852	<u> 130 </u>	Р	age 3
		YES	NO
13 Indicate the percentage of gaming activity operated in			
a The organization's facility	<u>.</u>]]	1	
b An outside facility		1	
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records			
Name. •	-		
Address -	-		
15a Does the organization have a contact with a third party from whom the organization receives gaming revenue?	15a		
b If 'Yes,' enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$			
c If 'Yes,' enter name and address of the third party			
Name •	-		
Address -	-		
16 Gaming manager information			
Name •	-		
Gaming manager compensation ► \$			
Description of services provided	.		
☐ Director/officer ☐ Employee ☐ Independent contractor			
17 Mandatory distributions			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a		
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	те		
organization's own exempt activities during the tax year ► \$			
BAA TEEA3703L 02/05/10 Schedule G (Form 9	90 or 99	0-EZ)	2009

SCHEDULE L (Form 990 or 990-EZ)

Transactions with Interested Persons

► Complete if the organization answered

'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2009

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Unspection

Department of the Treasury Internal Revenue Service

or 990-EZ.

Name of the organization Northern California Chapter - US						Employer identification number 14-1885230							
6 -41	Green Building C							_	_				
Part I	Excess Benefit Transaction Complete if the organization answ	n s (sec ered 'Yes	tion 50 on Forr	1(c)(3) n 990, Pa	and section ort IV, line 25a	n 501(c) or 25b, or	(4) organız Form 990-EZ	ation , Part	s only V, line	y). 40b.			_
1	(a) Name of disqualified person	d person (b) Description of transaction			i		rrected						
	1 (7)		(b) Description of Ransaction						_	Yes	No		
													├
						_							
													<u></u>
2 Ente secti	er the amount of tax imposed on the ion 4958	organiza	ition mai	nagers or	disqualified p	ersons d	uring the year	unde	> \$				
	er the amount of tax, if any, on line 2				ne organization	า			▶ \$				
Part II	Loans to and/or From Inter				-				,				
	Complete if the organization answ	ered 'Yes	' on Forn	n 990, Pa	rt IV, line 26 o	r Form 99	0-EZ, Part V,	line 38	a.				
(a)	Name of interested person and purpose		to or from		c) Original cipal amount	(d) ((d) Balance due (e) in defaut		default?	(f) Approved by board or committee?		agreement	
		То	From					Yes	No	Yes	No	Yes	No
	· · · · · · · · · · · · · · · · · · ·	-		<u> </u>					<u> </u>	\vdash			<u> </u>
				-									
	 	 						-	-				<u> </u>
						1.							
Total					▶ \$				١,,,	-71-4		7	~ - ~
Part III	Grants or Assistance Bene Complete if the organization	fitting I	nterestered 'Ye	ted Per es' on f	sons. Form 990, F	Part IV,	lıne 27.		<u>, </u>				
	(a) Name of interested person	(b) Relation:	ship betwee the orga	n interested persor	n and	(0) Amour	it and ty	pe of ass	sistance	;	
						-							
				_								_	
								_					
Part IV	Business Transactions Inve	olving I	nterest	ted Per	sons.		<u> </u>						
	Complete if the organization	answe	red'Ye	s' on F	orm 990, Pa	art IV, li	ne 28a, 28	b, or	28c.			_	
-	(a) Name of interested person	(b) Re intere	elationship l sted person organizatio	ship between erson and the transaction \$ (d) Description of transaction stransaction \$		iction	òrg		iring of ation's lues?				
Barrv Gi	les/CEO of BuildingWise	Board	d Membe	r		15,054.	Instructor	•				Yes	No X
													<u> </u>
		1											
DAA Far S	Division Ant and Demandaria Designation	M A a 4 81:	tina a-	- 		000	2:			- 000			
DAA FOTP	Privacy Act and Paperwork Reduction	JII ACT NO	ouce, sec	e ine insi	ructions for F	orm 990	Sche	eaule l	∟ (⊢orr	m 990	or 99	U-EZ)	2009

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

	2009
on	e firebasion s
Employer identific	ation number

Name of the organization Northern California Chapter - US Green Building Council	Employer identification number 14-1885230
Form 990, Part III, Line 4c - Program Service Accomplishments	
Other Programs:	
Special Initiatives & Partnerships: In 2009, the Chapter part	icipated in and created
various partnerships including green building educational prod	grams with Northern
California_chapters/unions_of_BOMA, NECA_and_IBEWAdditional:	ly, Chapter staff
participated in various conferences (West Coast Green, Norther	rn California
Facilities Expo, and others) throughout the region, partnersh	ips with cities (San
Francisco's Existing Building Energy Efficiency Panel), as we	ll as participation in
regional conferences/initiatives (Clean Tech Summit, US-China	Green Energy Council,
and many others.)	
USGBC Member Development: In February 2009, Operations took ov	ver membership
processing_from_our_national_organization_which_entailed_the_o	customization_and
implementation_of_a_membership_management_system_(with_website	e_interface.)
Subsequently, non-members were recruited through bi-weekly ema	ils and at Chapter
events.	
Form 990, Part III, Line 4d - Other Program Services Description	
Communications:	
Operated a website, published newsletters, and utilized other	online tools to
communicate to the general public and members (80,000+) about	green building
practices and events	
Form 990, Part VI, Line 5 - Description of Material Diversion of Assets	
Between 12/24-12/31/09, we became aware through monitoring our	online banking that
six payment checks we mailed out had been fraudulently altered	(both 'payee name and
amounts) and cashed. We contacted our bank, Wells Fargo, to in	itiate a fraud claim
BAA For Privacy Act and paperwork Reduction Act Notice, see the instructions for Form 990 TEEA4901L 07/17	yo9 Schedule O (Form 990) 2009

Green Building Council	14-1885230
Form 990, Part VI, Line 5 - Description of Material Diversion of Assets (continue	d)
 for the total of \$17,967.63. The compromised checking account v	was closed and a new
 one was opened.	
 Form 990, Part VI, Line 11 - Form 990 Review Process	
 Reviewed by ED & Treasurer prior to filing, then distributed to	the Board.
 Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Con	ıflicts
 This issue is raised in each board meeting, and it is also moni	tored in relation to
 branch and committee leaders. We have defined a process to dis	sclose or resolve
 potential conflicts through the Executive Committee.	
 Form 990, Part VI, Line 15a - Compensation Review & Approval Process for CEO, E	xec. Dir., or Top Mgtment
 The Board President solicits input from Board, staff, and other	volunteers. The
 President then does the review and meets with the Executive Dir	ector. Salary is
 negotiated; not sure if comparative data is used.	
 Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officers	& Key Employees
 Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officers Annual written reviews by both the employee and Executive Directions.	
 	tor. Compensation is
 Annual written reviews by both the employee and Executive Direction	tor. Compensation is
 Annual written reviews by both the employee and Executive Direction based on experience, performance, budget, and comparative data.	tor. Compensation is
 Annual written reviews by both the employee and Executive Direct based on experience, performance, budget, and comparative data. Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	tor. Compensation is
 Annual written reviews by both the employee and Executive Direct based on experience, performance, budget, and comparative data. Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available Conflict of interest is distributed to and signed by all Board	members. We have an financial overview,
 Annual written reviews by both the employee and Executive Direct based on experience, performance, budget, and comparative data. Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available Conflict of interest is distributed to and signed by all Board annual membership meeting with a report on the year, including	members. We have an financial overview,
 Annual written reviews by both the employee and Executive Direct based on experience, performance, budget, and comparative data. Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available Conflict of interest is distributed to and signed by all Board annual membership meeting with a report on the year, including programmatic highlights and achievements, and plans for the fol	members. We have an financial overview,
Annual written reviews by both the employee and Executive Direct based on experience, performance, budget, and comparative data. Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available Conflict of interest is distributed to and signed by all Board annual membership meeting with a report on the year, including programmatic highlights and achievements, and plans for the fol	members. We have an financial overview,
 Annual written reviews by both the employee and Executive Direct based on experience, performance, budget, and comparative data. Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available Conflict of interest is distributed to and signed by all Board annual membership meeting with a report on the year, including programmatic highlights and achievements, and plans for the fol	members. We have an financial overview,
 Annual written reviews by both the employee and Executive Direct based on experience, performance, budget, and comparative data. Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available Conflict of interest is distributed to and signed by all Board annual membership meeting with a report on the year, including programmatic highlights and achievements, and plans for the fol	members. We have an financial overview,
 Annual written reviews by both the employee and Executive Direct based on experience, performance, budget, and comparative data. Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available Conflict of interest is distributed to and signed by all Board annual membership meeting with a report on the year, including programmatic highlights and achievements, and plans for the fol	members. We have an financial overview,
 Annual written reviews by both the employee and Executive Direct based on experience, performance, budget, and comparative data. Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available Conflict of interest is distributed to and signed by all Board annual membership meeting with a report on the year, including programmatic highlights and achievements, and plans for the fol	members. We have an financial overview, lowing year.

Form **8868** (Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

OMB No 1545 1709

If you are	e filing for an Automatic 3-Month	Extension, compl	ete only Part I and	check this box		-	<u>► X</u>
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)							
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868							
Part 1 Automatic 3-Month Extension of Time. Only submit original (no copies needed).							
A corporation	n required to file Form 990-T and	requesting an auto	matic 6-month exte	ension – check	this box and	complete Part I	only -
All other corp income tax re	porations (including 1120-C filers eturns), partnerships, RE	MICS, and trusts m	ust use Form 70	004 to reques	t an extension o	f time to file
returns noted the additiona Form 990-T.	ling (e-file). Generally, you can ed below (6 months for a corporation of the composition	ion required to file I sion or (2) you file F ly completed and s	Form 990-T) Howev Forms 990-BL, 6069 Igned page 2 (Part	ver, you cannot . or 8870. group	file Form 886 returns, or a	8 electronically i	f (1) you want
	Name of Exempt Organization	•				Employer identifica	tion number
Type or	Northern California	Chapter - US	;				
print	Green Building Counc					14-1885230)
File by the due date for	Number, street, and room or suite number		ctions	-			
filing your return See	130 Sutter St. #600						
instructions	City, town or post office, state, and ZIP co	de For a foreign address.	see instructions				
	San Francisco, CA 94	104					•
Check type o	of return to be filed (file a separa	te application for e	ach return)		-		
X Form 990	[Form 990-T (cor	poration)		Form 472	20	
Form 990)-BL [Form 990-T (sec	tion 401(a) or 408(a	i) trust)	Form 522	27	
Form 990)-EZ	Form 990-T (trus	it other than above)		Form 606	59	
Form 990)-PF	Form 1041-A			Form 887	70	
Telephone If the orga If this is for theck this the extension	are in the care of Paul But No A15-738-5520 anization does not have an office or a Group Return, enter the org s box □ If it is for part of sisten will cover.	e or place of busine anization's four dig the group, check th	t Group Exemption is box ► and a	ites, check this Number (GEN) ittach a list with	the names a		
	st an automatic 3-month (6 mont	· ·	•	-			
	8/15, 20_10, to file		zation return for the	organization na	amed above		
	ension is for the organization's re	eturn for					
	calendar year 20_09_ or	00					
	tax year beginning	, ²⁰ , ar	ia enaing	, 20 -			
2 If this ta	ax year is for less than 12 month	s, check reason:	Initial return	Final retu	rn C	hange in accoun	ting period
3a If this ap nonreful	pplication is for Form 990-BL, 99 ndable credits. See instructions	0-PF, 990-T, 4720,	or 6069, enter the t	entative tax, les	ss any	3a \$	0.
b If this armade. In	oplication is for Form 990-PF or nclude any prior year overpayme	990-T, enter any re nt allowed as a cre	fundable credits and dit	d estimated tax	payments	3Ь\$	0.
c Balance deposit See inst	Due. Subtract line 3b from line with FTD coupon or, if required, tructions	3a Include your pa by using EFTPS (E	yment with this forn lectronic Federal Ta	n, or, if required ix Payment Sys	l, tem)	3c \$	0.
Caution. If yo payment instr	u are going to make an electron uctions.	ic fund withdrawal v	vith this Form 8868,	see Form 8453	8-EO and Forr	m 8879-EO for	
BAA For Priv	acy Act and Paperwork Reducti	on Act Notice, see	instructions.			Form 8868	(Rev 4-2009)

Form 8868	(Rev 4-2009)		Page
• If ¹ you a	are filing for an Additional (Not Automatic) 3-Month Extension, complete only	y Part II and check	this box ► X
Note. Only	complete Part II if you have already been granted an automatic 3-month extension	ension on a previou	sly filed Form 8868
• If you a	are filing for an Automatic 3-Month Extension, complete only Part I (on page		
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only	file the original	(no copies needed).
	Name of Exempt Organization		Employer identification number
Type or print	Northern California Chapter - US Green Building Council Number, street, and room or suite number If a P O box, see instructions		14-1885230 For IRS use only
File by the extended due date for filing the	Crosby & Kaneda, CPAs 1611 Telegraph Ave Ste 318		, or mo 52 day
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions	14.7	
	Oakland, CA 94612-2151		
X Form 9 Form 9 Form 9 STOP! Do I The boo Telepho If the or If this is whole ground members the state of the	Form 990-T (section 401(a) or 408(a) trust) 90-EZ Form 990-T (trust other than above) not complete Part II if you were not already granted an automatic 3-month extension of the group and the states of the extension is for part of time until 11/15 10-10-10-10-10-10-10-10-10-10-10-10-10-1	530, check this box mber (GEN) and attach a list will 0, and ending	ously filed Form 8868. If this is for the th the names and EINs of all
7 State	tax year is for less than 12 months, check reason Initial return In detail why you need the extension Taxpayer respectfully her information necessary to file a complete and	requests ad	
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tenta fundable credits. See instructions	ative tax, less any	8a \$
payme	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable cents made. Include any prior year overpayment allowed as a credit and any a orm 8868.	eredits and estimate amount paid previou	d tax sly 8b\$
c Balan with F	ce Due. Subtract line 8b from line 8a Include your payment with this form, o TD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment	r, if required, depos System) See instra	ıt 8c \$
Under penalties correct, and con	Signature and Verification of perjury. I declare that I have examined this form, including accompanying schedules and statements in the company of the control of the contr		owledge and belief, it is true, $Date \triangleright 8 \left(0 \right) \left(0 \right)$
	,		•

FIFZ0502L 03/11/09

Form 8868 (Rev 4-2009)

BAA